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## FEC FORM 2

## STATEMENT OF CANDIDACY

							=					
1.	(a) Name of Candidate (in full)											
	Blackburn, Marsha, , Mrs.,											
	(b) Address (number and street) 6103 Murray Lane	☐ Check if address changed				Candidate's FEC Identification Number     S8TN00337						
	(c) City, State, and ZIP Code					3. Is This New Amended	_					
	Brentwood		TN	3702	7-6209	Statement (N) OR (A)						
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate						
	REPUBLICAN PARTY	Senate			TN							
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)											
	NOTE: This designation should be	filed with the ap	propriate offi	ce listed in t	ne instructions.		_					
	(a) Name of Committee (in full)											
	Marsha for Senate											
	(b) Address (number and street) PO Box 3750						_					
	(c) City, State, and ZIP Code						_					
	Brentwood				TN	37024						
_												
	DE			_	<b>FHORIZED</b> g Representativ	COMMITTEES  es)						
8.	I hereby authorize the following nar candidacy.	ned committee,	which is NO	T my princip	al campaign cor	nmittee, to receive and expend funds on behalf of my						
	NOTE: This designation should be	filed with the pri	ncipal campa	nign committ	ee.							
	(a) Name of Committee (in full)											
	Blackburn Victory F	und										
	(b) Address (number and street) PO Box 3241						_					
	FO BOX 3241											
	(c) City, State, and ZIP Code						_					
	Brentwood				TN	37024						
	I certify that I have exa	nmined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.	_					
Si	gnature of Candidate					Date	<del>-</del>					
Blackburn, Marsha, , ,				[Elec	tronically Filed]	01/20/2023						
							_					
NO	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

Page \_\_\_2 **of** \_2\_\_\_

## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)  Blackburn Tennessee Victory Fund									
	(b) Address (number and street) PO Box 3750									
	(c) City, State, and ZIP Code									
	Brentwood	TN	37024							
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)									
	Cornyn Victory Committee									
	(b) Address (number and street) PO Box 13026									
	(c) City, State, and ZIP Code									
	Austin	TX	78711							
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campaig  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code		nmittee, to receive and expend funds on behalf of my							
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal campaig (a) Name of Committee (in full)		nmittee, to receive and expend funds on behalf of my							
	(b) Address (number and street)									
	(c) City, State, and ZIP Code									